on NPR. This past July, Christina and her husband were overjoyed when they discovered she was pregnant. It was their first pregnancy. But that joy turned to sorrow after the first ultrasound. The doctors couldn't detect a heartbeat, and they concluded it was a miscarriage.

When Christina asked the doctor, "What do I do next," the doctor recommended giving her body time to pass the pregnancy tissue—a process that can take days or even weeks. So Christina and her husband decided to wait and move on with their lives.

Soon after that appointment, the two of them drove from their home in Washington, DC, to Ohio to attend a family wedding. But during the drive, Christina started bleeding. She assumed her body had finally passed the pregnancy tissue. But later, in the middle of the night, she started bleeding again. It was serious.

It was at that time that Christina and her husband, at the advice of a nurse, went to an emergency room in Painesville, OH. Now, remember, Christina's doctor had already told her that her pregnancy ended in a miscarriage. But when she arrived at that Ohio hospital, the medical staff refused to provide her any care because they were afraid of violating Ohio's new abortion ban.

So while Christina was still in danger, still bleeding, and carrying a fetus with no heartbeat, the hospital discharged her and refused to treat her. She objected, even showing them her records confirming the miscarriage. She was ignored and sent home.

Hours later, she returned to that same ER. By that point, she had lost so much blood she had lost consciousness. The paramedics had to use a sheet to pull her limp body out of a bathtub and onto a stretcher. Christina's family thought she was going to die. And let's be blunt: The only reason her life was in peril was because of Ohio's State law banning abortion.

This is America's post-Roe reality: women denied urgent care because doctors and nurses are afraid of breaking State laws. Ohio's abortion ban subjects healthcare providers who violate it to felony charges, up to a year in prison, loss of medical licenses, and fines up to \$20,000. The law is so unclear in Ohio that even medical professionals struggle to navigate its narrow exceptions.

When you hear stories like that by Christina, imagine if it was a member of your family—your wife, the mother of your children, people who want to live desperately and simply need the healthcare to make it happen—it is really no surprise that Americans are fleeing red States to access essential healthcare in blue States.

My State of Illinois, for instance, has become a leader on reproductive freedom—a so-called oasis. Every single State that we border has either restricted abortion or abandoned it outright. For women living in the Mid-

west, our reproductive health facilities are indispensable. Look at the numbers. Before Roe was overturned, only 6 percent of women seeking abortions at Illinois Planned Parenthood facilities traveled from out of State—6 percent. Since the Dobbs decision, that number has jumped to 30 percent.

And I want to commend our State's leadership because they stepped in to provide care for women who have been betrayed by their own States. Earlier this month, Governor Pritzker signed a bill into law protecting women traveling to Illinois for reproductive care. Sadly, these efforts to protect reproductive freedom have also made Illinois providers a target. Just 2 days ago, after Governor Pritzker signed a bill into law, someone firebombed a Planned Parenthood clinic in Peoria—a clinic that doesn't even perform surgical abortions.

In post-Roe America, the mere act of seeking reproductive advice and care—even for a procedure as simple as a Pap smear—has taken on new risks. Lawmakers on both sides need to condemn this and any form of politically motivated violence against any person or entity.

If there is any doubt that the Dobbs decision has unleashed chaos, consider the impact on maternal health outcomes. Even before Roe was overturned, our Nation had the highest maternal mortality rate in the developed world—America, the highest maternal mortality rate in the developed world as of 2020, those death rates are more than 60 percent higher in States with abortion restrictions.

This is not a problem without a solution: Studies show that more than four in five pregnancy-related deaths are preventable. These mothers can be saved. And one way to prevent them is by expanding access to postpartum health coverage. That is why I have worked with Illinois Congresswoman ROBIN KELLY to pass a law that gives States the option to expand health coverage under Medicaid from 60 days postpartum to a full year. We led this effort because in our State, one-third of pregnancy-related deaths happen after 60 days postpartum.

So for States that have now outlawed abortion, you would imagine the first thing they would do is to take advantage of this new benefit and expand health coverage for its expecting mothers on Medicaid. That sounds like a nobrainer, right? Apparently not. Today, there are 15 States that have not extended Medicaid postpartum coverage, and 12 of these States have also passed laws restricting abortion. If they are truly dedicated to the new mother and her baby, why wouldn't they give them healthcare coverage for a full year after the baby is born to save their lives and the babies' lives?

So if you are a woman living in a State like Idaho or South Dakota, you can be forced to carry a pregnancy to term, but once you have had your baby, those States—Idaho and South Da-

kota—refuse to cover your healthcare during the most critical, dangerous postpartum period.

Let's get real. There is no world in which this position can be described as "pro-life."

We in the Senate can make a difference for all the women in America who have been abandoned by their States, and we can do it by restoring and codifying the right to reproductive freedom by passing pro-family policies, like the MOMMA's Act, which mandates Medicaid expansion and postpartum coverage.

Unfortunately, it seems the new MAGA majority in the House has other plans in mind. Just this past week, Majority Leader STEVE SCALISE pledged to a group of anti-choice activists that the overturning of Roe was "only the first phase of this battle." Those are his words. His Republican colleagues have already made good on it. Less than 1 month into the new Congress, House Republicans have introduced a dozen anti-abortion bills.

Here is my promise: Every one of those bills is destined to fail if it comes to the Senate. They are going nowhere because this majority and President Biden understand that all Americans deserve reproductive rights. And until we have a Congress and Supreme Court willing to protect those rights, we need to do everything in our power to stand against this extremist, anti-choice agenda.

I yield the floor.

RECESS

The PRESIDING OFFICER. Under the previous order, the Senate stands in recess until 2:15 p.m.

Thereupon, the Senate, at 12:47 p.m., recessed until 2:15 p.m. and reassembled when called to order by the Presiding Officer (Mr. LUJÁN).

The PRESIDING OFFICER. The Senator from Wyoming.

(The remarks of Mr. Barrasso pertaining to the introduction of S. 31 are printed in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

Mr. BARRASSO. I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. CARDIN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. WELCH). Without objection, it is so ordered.

(The remarks of Mr. CARDIN pertaining to the introduction of S. 53 are printed in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

Mr. CARDIN. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mrs. HYDE-SMITH. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Mississippi.

MARCH FOR LIFE

Mrs. HYDE-SMITH. Mr. President, this past Friday, tens of thousands of pro-life Americans came to Washington, DC, to march for the 50th consecutive year to be a voice for the voiceless. They marched because the pro-life movement did not end with the overturning of Roe v. Wade last summer. They marched because the end of Roe v. Wade represents a new beginning.

Thanks to the Supreme Court's decision in Mississippi's Dobbs case, for the first time in 50 years, the fate of the lives of millions of unborn children now rests not in the hands of unelected Federal judges but in the American people and their elected representatives.

I am grateful for the more than a dozen States that have answered the call, including my State of Mississippi, where babies in the womb are now legally protected even at their earliest and most vulnerable stages. But the fight for life also continues here in our Nation's Capital and here in the U.S. Senate. That is why it makes sense that, this year, the March for Life's route ended not at the U.S. Supreme Court, as in years past, but here in Congress.

As the chairman of the Senate Pro-Life Caucus, I am committed to fight for compassionate legislation to protect unborn children and their mothers. We will be a firewall against the radical abortion agenda of Senate Democrats and hold the Biden administration accountable for its reckless and illegal pro-abortion policies.

The contrast could not be clearer. Last week, the U.S. House of Representatives passed legislation that would guarantee the same basic medical care to babies who are born alive after an attempted abortion as would be given to any other baby born in any other circumstance. I am appalled that 210 House Democrats voted against this humane legislation. Apparently, even infanticide is no longer a bridge too

In addition, this month, the Biden administration's FDA rubberstamped the reckless distribution of chemical abortion drugs by mail and telemedicine, as well as retail pharmacies, without ever seeing a doctor in person. This decision turns retail pharmacies and post offices into abortion clinics.

The FDA's action provides no safeguards to screen by ultrasound for dangerous ectopic pregnancies and abandons pregnant women to suffering lifethreatening complications alone. These can include severe bleeding, infection, potential surgical intervention, and even death. The FDA's promotion of dangerous do-it-yourself abortions is not only unsafe, it is illegal. Specifically, the decision violates longstanding Federal criminal laws that clearly prohibit the mailing of abortion drugs. This decision puts the profits and political agenda of the abortion industry over the science and clear evidence that abortion drugs present grave dangers to pregnant mothers and certainly their unborn babies.

Later this week, I will introduce the SAVE Moms and Babies Act to reverse the FDA's reckless and illegal action and, at minimum, restore the basic health and safety requirement for these dangerous abortion drugs, which should never have been approved.

The issue of abortion gets to the heart about what it means to be human. Who counts as one of us? Why can brutally killing a baby before birth be justified simply because the baby is inconvenient, imperfect, unwanted, unplanned, or dependent on her mother?

Rather than answer these questions about the humanity of the child in the womb—the child sucking her thumb, the child whose heart is beating, and the child whose sonogram pictures are cherished as proof of life—the abortion industry wants you to look away from the baby.

Over the past year, we have witnessed millions of dollars of political advertisement spent to promote lies and fearmongering about the pro-life movement and pro-life laws and that try to pit unborn children against their own mothers.

As a mother, a woman, and a Senator, I know we must refute these lies, because each unborn child is not a threat but a blessing, a unique and unrepeatable individual created in the image of God.

In addition, the pro-life movement cares for both pregnant moms and their unborn babies. More than 2,700 pregnancy centers across the country provide critical medical and material support for women and families facing unplanned pregnancies. Several of my colleagues have already introduced commonsense measures to support pregnant moms and families, including through pregnancy centers.

As we move on from this year's March for Life and into a post-Roe era, we will never rest and we will never stop fighting until every unborn child is protected under our laws from the lethal violence of abortion.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

MARCH FOR LIFE

Mr. LANKFORD. Mr. President, we are in a historic season as a country. We are pausing to ask ourselves a question that quite frankly we have not really asked ourselves in a long time: When does life begin?

It is not just philosophical. It is not just theological. It is not just sci-

entific. It is personal, as each person has to come to a decision: When does life begin?

And when the Supreme Court made the Dobbs decision last summer, that actually put America back in the position that it had been in historically. Our Nation is 234 years old, and for 185 of those years, each State passed State laws to be able to determine the decision about this issue of when does life begin.

So the Dobbs decision was not a radical decision. It is the typical decision for Americans, quite frankly, for 185 of our 234 years. But it doesn't settle the issue of abortion. Abortion is still legal in America. As much as there is all the noise around the country right now that abortion has somehow gone away, it certainly has not. Abortion is still all over the country.

But it has pushed Americans, and it has pushed Americans specifically on this one issue: When does life begin?

Quite frankly, I have had fascinating conversations with people over the past 8 months that they had never actually contemplated this issue, that they had never stopped to be able to think about it. They just said: Abortion is legal. Abortion is legal. It is just a woman's choice, a woman's choice, a woman's choice, and I don't want to think about it.

But when the decision came down, a lot of people had to stop and say: When does life begin? Is it at birth? Is it after birth? Is it 10 minutes before birth? Is it a month before birth? Is it 2 months before birth?

Quite frankly, I have had this conversation with a lot of folks, and some folks have told me: Well, it is at viability

And I say: OK. Define viability for me, because viability in 1973, when the Court was struggling with Roe v. Wade, was very different than viability now. Medical science has advanced tremendously. So is viability 26 weeks or is it at 21 weeks of gestation? And if it is at 21 weeks, what is the difference between 20 weeks and 19 weeks? What is the difference between 18 weeks?

I look at these two pictures right here of this child—this one is out of the womb, and this one is 5 months earlier—and I ask the simple question: What is the difference between these two pictures of this child?

The only difference between that sonogram picture in the womb and that child outside of the womb is time. That is it.

The same DNA is in this child as in this child—the same parents, the same development. Everything is the same. The only difference is time.

I am 5 months older than I was 5 months ago because I have aged 5 months. So did that child from that moment.

So my question is very simple: When is a child a child? When does life begin? Is this one not alive and this one is alive simply because he is 5 months older? When is a child a child?